

<p style="text-align: center;"><b>South Dakota Department of Health</b>  <b>Administrative Policies and Procedures Manual</b></p>
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<u>No.</u>	<u>Title</u>	<u>Issued</u>	<u>Revised</u>
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**STATEMENT NO. 01**

**TITLE: Administrative/Legal Proceedings**

**ISSUED: August 1, 2005**

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No Department of Health (DOH) employee may publicly comment, discuss, editorialize, or provide verbal or written statements – including statements of opinion – as it pertains to ongoing or current administrative or legal proceedings under the DOH jurisdiction.

DOH employees must be aware that all e-mail produced on a state computer may be ultimately turned over to opposing parties in the event of litigation and may ultimately be viewed by the public. Employees must not create e-mail which they would not want to be used as evidence against the DOH in an administration or legal proceeding or to be read in a newspaper.

Employees identified as violating this policy will be subject to the appropriate disciplinary action in accordance with ARSD 55:01:12.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 02**

**TITLE: Administrative Rules**

**ISSUED: August 1, 2005**

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Each Division Director shall implement an annual review of the administrative rules of their respective division. The review shall consider the following:

- Continued applicability of existing rules;
- Changes to federal or state law requiring new rules or amendment to existing rules; and
- Necessary statute revisions to request, clarify or repeal rule-making authority.

Staff from Division of Administration will be available to assist with the review.

Recommendations for administrative rulemaking (new, amendment or repeal) must be made by the appropriate Division Director to the Secretary of Health for approval to initiate the rule promulgation process. Department of Health (DOH) programs promulgating or revising rules outside the annual process must notify the Division of Administration and request assistance as needed.

Administrative rules shall be written and promulgated in a manner consistent with the Legislative Research Council (LRC) requirements outlined in the LRC legislative drafting manual. A current copy of this manual is available through the Secretary of Health's office or on the LRC web page. The department's legal counsel shall review and approve proposed rules for legality before the rule promulgation process is initiated. The Secretary of Health's office will maintain and approve all forms used in the rules promulgation process and keep the master file of all DOH rules.

As designated by the Secretary of Health, the department's legal counsel will serve as the hearing officer for the public hearing and will conduct the public proceedings and prepare and issue the formal minutes of the public hearing.

The Secretary of Health or a designee will provide testimony regarding adopted rules to the legislative Interim Rules Review Committee.

Recommendations for statute revisions or additions to request or clarify necessary rule-making authority shall be made through the department's annual action issue process.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 03**

**TITLE: Advisory Committees/Task Forces/Workgroups**

**ISSUED: August 1, 2005**

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**A. Formation of Advisory Committees/Task Forces/Workgroups**

Recommendations for the formation of any new committee, task force or workgroup must be submitted to the Secretary of the Department of Health (DOH) for consideration and approval. Proposals must include name of the committee/task force/workgroup, its authority, purpose, staffing requirements, number of members, terms of members, number of meetings per year, estimated cost per meeting, and specific terms of reimbursable expenditures of members and funding source.

Whenever possible, the proposed activities should be incorporated into the responsibility of another existing DOH committee, task force or workgroup. All DOH committees, task forces or workgroups must have a sunset date not to exceed two years from its formation at which time the DOH will review the purpose of the group and make recommendations for its continuation to the Secretary of Health.

**B. Existing Committees**

The following information for each committee, task force or workgroup will be maintained by the responsible Division and updated as necessary:

- Name of group;
- Authority;
- Purpose; and
- Membership (including name, address and phone/fax numbers).

**C. Appointments/Resignations**

The Secretary of Health will be advised of all vacancies and must approve potential new members. Appointment letters will be drafted by the appropriate Division for the Secretary's signature. The names of all individuals who submit resignations or whose term expires will be forwarded to the Secretary's office and accompanied by a draft thank you letter for the Secretary's signature.

**D. Abolishing Committees/Task Forces/Workgroups**

Committees, task forces and workgroups whose mission has been accomplished or which are not able to achieve their mission should be abolished pending approval from the Secretary of Health. A letter signed by the Secretary of Health will be sent to members informing them that the group has been disbanded and thanking them for their service.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 04**

**TITLE: Bioterrorism Event Reporting**

**ISSUED: August 1, 2005**

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Bioterrorism is always a criminal act. By federal law, the Federal Bureau of Investigation (FBI) is the assigned response agency.

**A. Handling Suspicious Mail**

The likelihood of receiving a package or letter containing suspicious substances is remote. However, it is important for Department of Health (DOH) employees to be aware of how to handle suspicious envelopes or packages. In the event a suspect envelope or package is received by the DOH, the employee should:

- Isolate the envelope/package;
- Evacuate the immediate area; and
- Promptly notify the appropriate mail contact (Kathy Miller – Health Building; Carol Taylor – Health Laboratory; and Scott Gregg – Community Health Services field offices).

A complete copy of the South Dakota Government Guidelines for Handling Mail can be found at <http://www.state.sd.us/homeland/suspmail/govprotocol.htm>.

**B. Report of a Bioterrorism Event or Suspected Event**

Reports of a bioterrorism event or suspected bioterrorism event by the public should always go to law enforcement first who will report the event to the Department of Public Safety and DOH.

DOH staff receiving calls from the public reporting a bioterrorism event or suspected event should first determine whether or not the event or suspected event has been reported to law enforcement. If it has been reported, DOH staff should gather details from the caller regarding the event or suspected event. If the caller has not reported the event or suspected event to law enforcement, the DOH staff should instruct the caller to notify the proper authorities (i.e., FBI/police) in their jurisdiction. DOH staff should not be the ones to relay details to the law enforcement.

DOH staff should report calls and details to the State Epidemiologist.

**C. Report of Unusual Illness/Death/Diagnosis of Suspect Bioterrorism Agent**

Laboratory staff shall immediately report any suspect or confirmed isolate of a likely bioterrorism agent to the Laboratory Director and State Epidemiologist. Office of Disease Prevention staff shall immediately report any suspect or confirmed report of a likely bioterrorism agent to the State Epidemiologist.

If at any time during a disease investigation there appears to have been intentional or threatened use of a virus, bacteria, fungi, or toxin to cause disease or death in humans, animals or plants, it must be reported

to the State Epidemiologist who will notify the Secretary of Health who will determine appropriate action.

**D. Likely Bioterrorism Agents Requiring Immediate Reporting**

The following bioterrorism agents require immediate reporting:

- Anthrax – *Bacillus anthracis*
- Brucellosis – *Brucella sp.*
- Botulism – *Clostridium botulinum*
- Plague, Pneumonic – *Yersinia pestis*
- Tularemia – *Francisella tularensis*
- Smallpox – Variola
- Viral Hemorrhagic Fevers

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Secretary of Health

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**STATEMENT NO. 05**

**TITLE: Block Grants**

**ISSUED: August 1, 2005**

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The following definitions are necessary to meet block grant review requirements:

1. "*Supplantation*," as it relates to Block Grants is defined as the zeroing out of a revenue source or the replacement of a revenue source with Block Grant funds.
2. "*Major Medical Equipment*," as it relates to Block Grants is defined as a single piece of equipment which costs over \$25,000.
3. "*Administrative Costs*," as it relates to Block Grants is defined as the indirect costs that an agency(ies) allocates to the grant in accordance with its approved costs allocation plan(s).

These definitions are required for the Maternal and Child Health (MCH) and Preventive Health and Health Services (PHHS) Block Grants and pertain to all grants unless specifically defined in the grant guidance.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 06**

**TITLE: Communications – Contact with Legislators**

**ISSUED: August 1, 2005**

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All requests for information or inquiries from individual legislators or the Legislative Research Council (LRC) must be forwarded to the Secretary of Health and the Director of the Division of Administration. The Secretary of Health or Director of Division of Administration will respond in writing to LRC or the legislator.

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Secretary of Health

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**STATEMENT NO. 07**

**TITLE: Communications – Contact with the Media**

**ISSUED: August 1, 2005**

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Division Directors and office administrators have primary responsibility for managing media inquiries in their respective areas. Whenever absent, these individuals must delegate media contact responsibilities to a designated representative(s) and notify the Public Information Officer (PIO) of whom the representative is.

All staff responding to media inquiries must notify the PIO of the reporter's name and media outlet, the date of the inquiry, the nature of the inquiry, the response provided, and an indication of whether follow-up is needed. This report may be made by e-mail or by phone.

Department staff not designated to respond to media calls but contacted directly by the media should refer calls to the PIO or their Division Director. Field staff should route media inquiries to the PIO or their respective office administrator for initial response. Field staff or other appropriate technical staff may be directed to respond to media inquiries at the discretion of the PIO or responsible Division Director.

All staff should alert the PIO and their respective Division Director immediately about public health emergencies and other potentially sensitive issues that could result in media interest. This notification allows time to plan an appropriate response and assure that such matters are managed effectively.

Staff must coordinate any department-initiated media contacts with the PIO to ensure that messages are appropriate, consistent with department policy and prepared according to standard journalistic style. This includes news releases, news briefings, news conferences, public service announcements, letters to the editor, and guest editorials.

The Secretary of Health retains final authority on whether a response is provided to a media inquiry, and what the content of that response should be.

The PIO is available to provide advice, consultation and feedback on media inquiries.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 08**

**TITLE: Communications – News Releases**

**ISSUED: August 1, 2005**

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All news releases issued by the Department of Health must be reviewed by the Public Information Officer (PIO) and approved by the Secretary of Health prior to release.

Individual offices requesting a news release must either submit a draft release to the PIO for editing and approval or provide the PIO with the information needed to draft the release. Individual office staff are responsible for obtaining the necessary approval from their respective Division Director.

The PIO, with guidance from the Secretary, shall determine whether news releases are appropriate. The Secretary retains final authority whether to issue news releases.

The PIO will maintain a file of all news releases disseminated by the department.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 09**

**TITLE: Communications – Publications Review and Approval**

**ISSUED: August 1, 2005**

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Prior to publication and distribution, all publications developed or produced by the Department of Health must be reviewed and approved by the Public Information Officer (PIO) to ensure that messages/materials are appropriate and consistent with department policy. Publications include materials such as brochures, booklets, posters, fliers, newsletters, reports, resource guides, and other materials designed for dissemination. All promotional and advertising items must be submitted to the PIO for approval.

Materials submitted to the PIO for review and approval will be returned to submitting staff within five working days.

Program staff developing such materials are responsible for clearing publications through their respective Division Director. The Secretary of Health retains final authority on whether to issue publications.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 10**

**TITLE: Communications – World Wide Web**

**ISSUED: August 1, 2005**

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Program directors are responsible for regular review of the content on their respective web pages and assuring the information remains current and accurate. All internal requests for additions to the Department of Health (DOH) World Wide Web home page must be reviewed by the Public Information Officer (PIO) prior to placement. Potential additions to the page may be drafted by respective programs and submitted to the PIO for final editing and placement, or may be developed with the assistance of the PIO. Programs with web development software may develop web pages, however, any changes made to the DOH live web site must still go through the Division of Administration and be physically made by Administration staff. Any content that is questionable will be resolved before being published to the live web. The Division of Administration retains the option to edit for form, style and content with notification to the program administrator.

Priority will be given to content that reflects current DOH initiatives, is the subject of existing department publications, or provides information frequently requested of the agency.

All requests from DOH staff or outside entities to include department information on other web sites must be approved by the PIO. The Secretary of Health retains final authority over the content of both the department's web page and what information the department will provide for other sites.

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Secretary of Health

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**STATEMENT NO. 11**

**TITLE: Computers – E-Mail**

**ISSUED: August 1, 2005**

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Updates of e-mail addresses shall be the responsibility of the employee's immediate supervisor. Upon the hiring or departure of an employee, the supervisor must contact the Help Desk (773-4357) and request a mailbox update.

As mandated by state policy, state computer equipment is limited to use for official state business only. However, reasonable and appropriate personal communications are allowed. Supervisors are responsible for ensuring that their employees understand appropriate and inappropriate usage as well as standards for use. Under no circumstances are DOH employees allowed to use the state's communication system to engage in outside business interests or for inappropriate, offensive or illegal activities. Employees are encouraged to use common sense. If in doubt, do not use state resources.

All messages composed, sent and received are and remain the property of the State of South Dakota and, as such, may be viewed or accessed at any time. Employees identified as violating this policy will be subject to the appropriate disciplinary action in accordance with ARSD 55:01:12.

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Secretary of Health

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**STATEMENT NO. 12**

**TITLE: Computers – File Storage and Maintenance**

**ISSUED: August 1, 2005**

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All Department of Health (DOH) employees should store work files on their user directory. These files will be maintained on a Bureau of Information and Telecommunications (BIT) server which is backed-up on a daily basis BIT by staff.

Workfiles stored on the c:\work\directory are not backed up by BIT staff and it shall be the responsibility of each employee to ensure adequate backup of these files.

All employees are responsible for maintaining current work files for all computer applications. Staff must delete all work files or messages that are not used on a regular basis. The employee's immediate supervisor shall be responsible for assuring compliance with this policy.

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Secretary of Health

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**STATEMENT NO. 13**

**TITLE: Computers – Service and Development Requests**

**ISSUED: August 1, 2005**

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All requests for computer repairs and computer hardware and standard software installations shall be made to the Bureau of Information and Telecommunications (BIT) Help Desk at 773-4357 or via e-mail using the *Automatic Help Desk Response* address with a carbon copy to the appropriate office administrator.

All requests for systems development shall be made through the Finance Officer who will forward appropriate requests to the designated BIT point of contact (Monty Gloe). This includes any systems development or modification to existing programs.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 14**

**TITLE: Computers – Software/Applications**

**ISSUED: August 1, 2005**

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All requests for non-standard computer hardware and software installations (i.e., approved software, federal applications, software upgrades, demos, and public domain "shareware") require moratorium approval from the Bureau of Information and Telecommunications (BIT). Staff needing non-standard hardware/software installed must work with the Finance Officer who will submit the required moratorium request documentation to BIT. BIT will inform the Finance Officer of the moratorium determination. If approved, staff can proceed with the request for installation through the BIT Help Desk.

Once moratorium approval has been received, employees needing computer software installed must have their supervisor submit a work order by contacting the BIT Help Desk at 773-4357 or by generating an automatic ticket via e-mail.

If an employee adds a non-standard software program to the computer which has not been approved by BIT, the software will be removed from the employee's computer at the employee's expense. Employees will also be monetarily responsible for any damage caused by the non-standard software on their computer.

As mandated by state policy, state computer equipment is limited to use for official state business only. Computer games and unlicensed software will not be permitted on state computers. Employees found to be in violation of this policy will be subject to the appropriate disciplinary action.

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Secretary of Health

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**STATEMENT NO. 15**

**TITLE: Computers – Training**

**ISSUED: August 1, 2005**

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If shall be the responsibility of the employee's immediate supervisor to ensure that each employee receives computer training as necessary to perform job duties.

As standard applications supported by the Bureau of Information and Telecommunications (BIT) are changed, department staff will complete the necessary training courses in a timely manner.

Training forms shall be completed by the employee via e-mail, approved by the supervisor, and forwarded electronically to the TRAINING REGISTRATION (BOP) mailbox.

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**STATEMENT NO. 16**

**TITLE: Contracts**

**ISSUED: August 1, 2005**

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**A. Contract Preparation and Approval**

Department of Health (DOH) programs intending to contract with an outside individual or agency must first obtain initial approval from the appropriate Division Director. In obtaining approval, the program must clearly state what is expected of the Consultant in a manner that would permit someone who is not a party to the contract to know what the Consultant is to do.

All DOH contracts must be sent to Kathy Miller or Leah McQuiston to be typed on the approved DOH contract boilerplate. Any changes to the boilerplate must have the prior approval of the DOH Finance Officer and legal counsel.

The program shall forward information to the contract manager in the Finance Office regarding the purpose of the contract, the consultant's name and address, the total amount of the contract, the funding source, and contract period. The information will then be forwarded to the Finance Officer. The Finance Officer will submit the contract to Executive Management for review and approval. All contract requests approved by Executive Management shall be submitted by the Finance Officer to the Governor's Office for final approval.

After all approvals are obtained, the program will mail the W-9 form and two copies of the contract to the Consultant for signature along with a letter requesting the Consultant to complete the required section and return both signed copies to the program. Once returned, the program will forward the completed contracts and W-9 form to the contract manager who will route for DOH signatures. All contracts, whether expenditure or revenue, must be signed by the DOH Finance Officer and the appropriate Division Director or program representative. Contracts over \$50,000 must also be signed by the Director of the Division of Administration. Expenditure contracts may not extend past May 31<sup>st</sup> of each year.

After all DOH signatures have been obtained, the original contract will be returned to the program to be forwarded to the Consultant. The second original will be forwarded to the State Auditor by the Finance Office. The Finance Office shall also keep a copy of the signed contract for the department's files. The Consultant may not begin to perform services before the last signature date on the contract.

Contracts generated by other state agencies requiring DOH signature shall be approved by Executive Management and signed by the equivalent-level department staff (i.e., contracts signed by a cabinet member shall be signed by the Secretary of Health, contracts signed by division directors shall be signed by the appropriate Division Director, etc.).

**B. Contracts with Indian Tribes**

Contracts with Indian Tribes must contain the following paragraph:

The DELEGATE irrevocably consents to suit by the State of South Dakota in the state courts of South Dakota for reimbursement of any funds paid by the State of South Dakota to the grantee under this grant in the event of the breach of any of the terms and conditions of this grant by the grantee or in the event of the failure of the grantee to comply with any federal or state law, rule or regulation pertaining to this grant. The grantee organization hereby expressly and irrevocably waives any immunity from such suit in the state courts of South Dakota which it might otherwise have.

**C. Contracts with Business Associates**

1. Protected Health Information Provision – All DOH contracts must contain one of the following provisions related to the Health Insurance Portability and Accountability Act (HIPAA):

a. Contracts Not Involving Protected Health Information (PHI)

This contract does not require (Consultant/Provider) to engage in a function or activity involving the use or disclosure of the State's Protected Health Information (PHI) as defined in the Health Insurance Portability and Accountability Act (HIPAA), 45 CFR §164.501.

b. Contracts with Other HIPAA Covered Entities Involving PHI

(Consultant/Provider) is a "covered entity" as defined in the Health Insurance Portability and Accountability Act, 45 CFR §164.501, and will abide by the rules and regulations set forth in 45 CFR Parts 160 and 164 (HIPAA).

c. Contracts with Business Associates Involving PHI

Pursuant to requirements of the Health Insurance Portability and Accountability Act, 45 CFR Parts 160 and 164 (HIPAA), the department's *Administrative Policy Statement No. 23*, as modified from time to time during the term of this agreement, is incorporated by reference and made a part of this agreement as is fully set forth herein.

(Consultant/Provider) shall *not* be allowed to distribute protected health information (PHI) to any other person or entity except \_\_\_\_\_, and then only for the following purposes: \_\_\_\_\_.

(Consultant/Provider) shall *not* be allowed to retain PHI in any format or media except \_\_\_\_\_. If (Consultant/Provider) is authorized to retain PHI pursuant to the terms of this contract, (Consultant/Provider) is obligated to continue to comply with the department's *Administrative Policy Statement No. 23*, as modified at all times that (Consultant/Provider) has possession or supervision of such PHI.

2. Security Provisions – All DOH contracts must contain the following security provision:

- a. Pursuant to requirements of the Health Insurance Portability and Accountability Act, 45 CFR Parts 160 and 164 (HIPAA), the state's *Administrative Policy Statement No. 23*, as modified from time to time during the term of this agreement, is incorporated by reference and made a part of this agreement as is fully set forth herein.

(Consultant/Provider) shall *not* be allowed to distributed Protected Health Information (PHI) to any other person or entity except \_\_\_\_\_, and then only for the following specified purposes: \_\_\_\_\_.

(Consultant/Provider) shall *not* be allowed to retain PHI in any format or media except \_\_\_\_\_. If (Consultant//Provider) is authorized to retain PHI pursuant to the terms of this contract, (Consultant/Provider) is obligated to continue to comply with the state's *Administrative Policy Statement No. 23*, as modified at all time that (Consultant/Provider) has possession or supervision of such PHI.

(Consultant/Provider) shall report to State, within 72 hours, any breach in confidentiality the (Consultant/Provider) becomes aware of. (Consultant/Provider) also agrees to mitigate in good faith, and to the extent practicable, any harmful effect resulting from the breach in confidentiality, both on its own and with State. Such a breach would allow State to terminate the contract for cause and take any other actions deemed appropriate by State. [45 CFR §164.504 (e)(2)(ii)(C) and 45 CFR §164.314 (a)(2)(i)(C) and (D)]

- b. If the consultant/provider is to retain PHI in an electronic format, the following provision shall be included:

(Consultant/Provider) shall ensure that all appropriate safeguards are implemented to protect the confidentiality, integrity and availability of the electronic protected health information (EPHI) created, received, maintained, or transmitted on behalf of State. [45 CFR §164.314 (a)(2)(i)(A)]

(Consultant/Provider) shall ensure that any agent, including a subcontractor to whom it provides such information, agrees to implement reasonable and appropriate safeguards to protect any EPHI (Consultant/Provider) received. [45 CFR §164.314 (a)(2)(i)(B)]

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 17**

**TITLE: Finance – Deposit of Cash**

**ISSUED: August 1, 2005**

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**A. State Office**

Cash received by Department of Health staff must be forwarded to the department's Finance Office on the day received. Fiscal staff shall receipt the money the same day and deposit it with the State Treasurer within three working days.

**B. Field Offices**

Program policies covering the handling of cash in field offices must be developed, implemented and filed with the Finance Office.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 18**

**TITLE: Finance – Overdue Accounts**

**ISSUED: August 1, 2005**

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The Department of Health (DOH) will utilize the following schedule to collect accounts:

1. First month billing will be due upon receipt.
2. Second notice will be given 60 days after service is provided and will be due upon receipt. Compounded annual interest of 12 percent plus cost will be charged on all accounts 30 days past due.
3. Third and final notice will be given 90 days after service is provided and will be due upon receipt. Interest of 12 percent plus cost will be charged on all accounts 30 days past due. Unless some type of payment has been received within 14 days after the final notice has been sent, the account will be assigned to the Office of Risk Management – State Collections Office. An administrative charge of 35 percent will assessed on all accounts turned over to the DOH's collection agency.

The department will submit all overdue accounts of \$3.00 and over plus all returned checks to the State Collection Office for collection. Based on a cost analysis for billing of overdue accounts, the department will allow all overdue accounts under the amount of \$3.00 to be written off as bad debts.

On credit balances for laboratory services, the department shall notify the client after one year has passed with no activity on their account of their option of carrying the credit for an additional 60 days or receiving a refund. Based on cost analysis, credit balances of \$20.00 and under with no account activity for one year will not require client notification or a refund.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 19**

**TITLE: Financial Reports**

**ISSUED: August 1, 2005**

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The Department of Health's Finance Office is responsible for preparing all department financial reports for Executive Management as well as those required by the Governor's Office, federal/state agencies and other private/public entities. The Finance Office will submit financial reports to the appropriate agency and provide a copy to the appropriate Division Director.

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Doneen B. Hollingsworth  
Secretary of Health

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Date



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**STATEMENT NO. 20**

**TITLE: Grant Applications/Letters of Support**

**ISSUED: August 1, 2005**

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Division of Administration staff is available to assist with writing grant applications as requested. Requests for assistance should be made to the Director of the Division of Administration.

**A. Review Procedure for New Grant Program Applications**

Prior to applying for funding under a new grant program, pertinent background information and materials must be reviewed by Executive Management for approval to proceed with the application process.

**B. Review Procedure for Ongoing Applications**

Programs responsible for submitting grant applications in conjunction with a current, ongoing program shall ensure that all persons or agencies involved in supporting grant activities have ample opportunity for review and comment. Existing grant programs which are substantially modified or redirected compared to previous submissions shall be managed as "new" grant programs and are subject to the review process for new grant submissions (see above). Programs in doubt as to whether changes are substantial enough to require review as a "new" program should contact the Division of Administration for guidance.

**C. Final Approval of Grant Submissions**

The Secretary of Health must approve all grant applications submitted by or on behalf of the DOH. However, this authority may be delegated by the Secretary to the appropriate Division Director. The department's Finance Officer must review and approve the budget prior to the Secretary's final approval. Copies of all grant applications must be filed with the department's Finance Office once the grant application has been signed by the Secretary.

**D. Letters of Support**

All requests for letters of support from persons or agencies outside the DOH must be accompanied by a summary of the goals, objectives and activities of the project, anticipated DOH involvement (if any), and the name and address of who the letter should be addressed and sent to. All requests must be submitted to the Division of Administration at least five working days before the letter is needed. The Division of Administration will forward relevant information to Executive Management who will make a final determination of the department's support for the proposal. All letters of support shall be approved and signed by the Secretary of Health or the Secretary's designee.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 21**

**TITLE: Hearing Officer**

**ISSUED: August 1, 2005**

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The Secretary of Health shall act as Hearing Officer for any Department of Health program or may delegate this authority as necessary.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 22**

**TITLE: HIPAA – Notice of Privacy Practice**

**ISSUED: August 1, 2005**

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**A. Purpose**

The purpose of this policy is to set forth the Department of Health's (DOH) policy regarding its *Notice of Privacy Practices* (Notice), as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. §154.520 (HIPAA) and other state and federal laws.

**B. Definitions**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information:* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

The DOH will develop and maintain a *Notice of Privacy Practices* and provide such notice to all program participants, as required by law. The acknowledgement form signed by program participants shall be retained by the DOH according to state retention policies for a period of 6 years.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 23**

**TITLE: HIPAA – Obligations of Business Associates**

**ISSUED: August 1, 2005**

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**A. Purpose**

The purpose of this policy is to set forth the Department of Health's (DOH) policy regarding the obligations of Business Associates as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. Parts §160.103 (HIPAA) and other state and federal laws.

HIPAA privacy rules identify a new category of business relationship, called a "business associate". This policy specifies when the DOH may disclose an individual's protected health information to a business associate of the DOH, and specifies provisions that shall be incorporated into all contracts between the DOH and business associates.

**B. Definitions**

1. *Business Associate*: "Business Associate" means (per 45 CFR § 160.103):

- a. With respect to the DOH, a person who:
  - (1) On behalf of the DOH, but other than in the capacity of a DOH employee, performs or assists in the performance of:
    - (a) A function or activity involving the use or disclosure of protected health information, including claims processing or administration, data analysis, processing or administration, utilization review, quality assurance, billing benefit management, practice management, and repricing; or
    - (b) Any other function or activity regulated by federal regulations at 45 CFR Subtitle A, Subchapter C; or
  - (2) Provides, other than in the capacity of a DOH employee, legal, actuarial, accounting, consulting, data aggregation, management, administrative, accreditation, or financial services to or for the DOH, or for an organized health care arrangement in which the DOH participates, where the provision of the service involves the disclosure of individually identifiable health information from the DOH, or from another business associate of the DOH, to the person.
- b. A covered entity participating in activities or providing services as described in (a)(1) or (a)(2) of this definition to or for such organized health care arrangement, does not, simply through the performance of such function or activity or the provision of such service, become a business associate of other covered entities participating in such organized health care arrangement.
- c. A covered entity may be a business associate of another covered entity.

- d. The following are NOT business associates or business associate relationships: (1) DOH employees, offices, and programs; (2) medical providers providing treatment to individuals; (3) enrollment or eligibility determinations, involving the DOH clients, between government agencies; (4) payment relationships, such as when the DOH is paying medical providers, child care providers, managed care organizations, or other entities for services to the DOH clients or participants, when the entity is providing its own normal services that are not on behalf of the DOH; (5) when an individual's protected health information is disclosed based solely on an individual's authorization; (6) when an individual's protected health information is not being disclosed by the DOH or created for the DOH; and (7) when the only information being disclosed is information that is de-identified.
- 2. *Protected Health Information:* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

## **C. Policy**

### **1. General**

- a. The DOH may disclose an individual's protected health information to a business associate and may allow a business associate to create or receive an individual's protected health information on behalf of the DOH, if the business associate has first entered into a contract with the DOH which incorporates this policy into the terms of such contract.
- b. A business associate relationship is formed only if protected health information is to be used, created, or disclosed in the relationship.
- c. If a contractor or business partner is a "business associate", the contract that defines the contractual relationship remains subject to all federal and state laws and policies governing the contractual relationship, in addition to the requirements of this policy which are incorporated into such contract as additional contract provisions.

### **2. Requirements Applicable to Business Associates**

- a. All business associates shall:
  - (1) Not use or further disclose protected health information other than as specifically permitted or required by the contract or as required by law;
  - (2) Use appropriate safeguards to prevent use or disclosure of the information other than as provided for by the contract;
  - (3) Report to the DOH any use or disclosure not allowed by the contract of which the business associate becomes aware;

- (4) Ensure that any agents or subcontractors to whom it provides protected health information agrees to the same restrictions and conditions that apply to the business associate under the contract;
  - (5) Make protected health information available to the individual in accordance with *Administrative Policy and Procedure Statement No. 24*;
  - (6) Makes its internal practices, books, and records relating to the use and disclosure of protected health information available to the DOH and to the United States Department of Health and Human Services for the purpose of determining the DOH's compliance with federal requirements; and
  - (7) At termination of the contract, if reasonably feasible, return or destroy all protected health information that the business associate still maintains in any form, and keep no copies thereof. If not feasible, the business associate will continue to protect the information.
- b. The DOH may authorize termination of the contract if the DOH determines that the business associate has violated a material term of the contract.
  - c. If the business associate of the DOH is another governmental entity:
    - (1) The DOH may enter into a memorandum of understanding (federal) or a joint powers agreement (state), rather than a contract, with the business associate if the memorandum of understanding or joint powers agreement contains terms covering all objectives of 2.a., above, of this policy;
    - (2) The memorandum or agreement does not need to contain specific provisions required under 2.a., above, if other law or regulations contain requirements applicable to the business associate that accomplish the same objective.
  - d. If a business associate is required by law to perform a function or activity on behalf of the DOH, or to provide a service to the DOH, the DOH may disclose protected health information to the business associate to the extent necessary to enable compliance with the legal requirement, without a written contract or agreement, if:
    - (1) The DOH attempts in good faith to obtain satisfactory assurances from the business associate that the business associate will protect health information to the extent specified in 2.a., above; and
    - (2) If such attempt fails, the DOH documents the attempt and the reasons that such assurances cannot be obtained.
  - d. Other requirements: If specifically authorized in the written contract or agreement between the DOH and the business associate, the business associate may:

- (1) Use information it receives in its capacity as a business associate to the DOH, if necessary:
  - (a) For proper management and administration of the business associate;
  - (b) To carry out the legal responsibilities of the business associate; or
  - (c) Other proper uses identified by contract.
- (2) Disclose information it receives in its capacity as a business associate if:
  - (a) The disclosure is required by law; or
  - (b) The business associate receives assurances from the person to whom the information is disclosed that:
    - (i) It will be held or disclosed further only as required by law or for the purposes to which it was disclosed to such person; and
    - (ii) The person will notify the business associate of any known instances in which the confidentiality of the information has been breached.

3. Responsibilities of the DOH in Business Associate Relationships

- a. The DOH's responsibilities in business associate relationships include, but are not limited to, the following:
  - (1) Receiving and logging an individual's complaints regarding the uses and disclosures of protected health information by the business associate or the business associate relationship;
  - (2) Receiving and logging reports from the business associate of possible violations of the business associate contracts;
  - (3) Implementation of corrective action plans, as needed; and
  - (4) Mitigation, if necessary, of known violations up to and including contract termination.
- b. The DOH will provide business associates with this policy or any subsequent modifications, and may provide consultation to business associates as needed on how to comply with contract requirements and this policy regarding protected health information.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 24**

**TITLE: HIPAA – Right to Access, Inspect and Copy Protected Health Information**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding the rights of program participants to access, inspect, and copy protected health information under the Health Insurance Portability and Accountability Act, 45 C.F.R. § 164.524 (HIPAA).

**B. Definitions**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information:* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

Upon receipt of a written request, the DOH will provide program participants with access to their protected health information maintained by the DOH, as required by law, and will offer program participants a review process when certain requests are denied. When access is provided, program participants will be allowed to obtain a copy of the information requested. However, the DOH, under its discretion and as authorized by law, may charge program participants for the reasonable costs associated with providing such access.

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Doneen B. Hollingsworth  
Secretary of Health

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Date



<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 25**

**TITLE: HIPAA – Right to Accounting of Disclosure of Protected Health Information**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding the rights of program participants to receive an accounting of disclosures of protected health information under the Health Insurance Portability and Accountability Act, 45 C.F.R. § 164.528 (HIPAA).

**B. Definitions**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information:* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

Upon receipt of a written request, the DOH will provide program participants with an accounting of the DOH's disclosures of their protected health information, as required by law. If the DOH is unable to provide the accounting within the required time period, it will provide a written statement of the reasons for the delay and the date the accounting will be made available.

Disclosures made for treatment, payment or health care operations are not required to be logged or disclosed.

The DOH may, under its discretion and as authorized by law, charge program participants for the reasonable costs associated with providing such disclosure. The DOH may suspend a program participant's right to an accounting of disclosures under limited circumstances, as authorized by law.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 26**

**TITLE: HIPAA – Right to an Amendment of Protected Health Information**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding the rights of program participants to an amendment of protected health information under the Health Insurance Portability and Accountability Act, 45 C.F.R. §164.526 (HIPAA).

**B. Definitions**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information:* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

Upon receipt of a written request, the DOH will amend protected health information maintained by the DOH, as required by law. The DOH may deny certain requests for amendments, but will properly notify the program participant in the event of a denial and explain how the program participant may respond to a denial.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 27**

**TITLE: HIPAA – Right to Restrict Use and Disclosure of Protected Health Information**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding the rights of program participants to restrict the DOH's use and disclosure of protected health information under the Health Insurance Portability and Accountability Act, 45 C.F.R. § 164.522 (HIPAA).

**B. Definitions**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information:* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

Upon receipt of a written request, the DOH will restrict its use and disclosures of a program participant's protected health information, as required by law. However, the DOH is not required to agree to all restriction. If the DOH agrees to a restriction, it may later terminate its agreement under limited conditions.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 28**

**TITLE: HIPAA – Right to Confidential Communications**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding confidential communications, as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. §164.522 (HIPAA) and other state and federal laws.

**B. Definition**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

Program participants (or personal representative) may ask that the DOH take reasonable steps to ensure that communications with program participants remain confidential. This can be achieved by contact through an alternate means or location (i.e., alternate phone number or address). The DOH can accept or deny requests based on the feasibility of each individual request, and may later terminate the request in limited circumstances.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 29**

**TITLE: HIPAA – Complaints**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding complaints, as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. §160.530 (HIPAA) and other state and federal laws.

**B. Definition**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

**C. Policy**

The DOH will take all reasonable and good faith efforts to maintain the strict rules relative to HIPAA to maintain the privacy of the PHI of program participants. Program participants (or personal representatives) who feel their privacy rights under HIPAA have been violated by the DOH may file a formal complaint with the DOH Compliance Officer. Any DOH employee who receives a complaint will report the incident to the DOH Compliance Officer. Program participants may also file complaints directly with the Office for Civil Rights (OCR) by calling (866) 627-7748 or visiting [www.hhs.gov/ocr/hipaa](http://www.hhs.gov/ocr/hipaa).

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 30**

**TITLE: HIPAA – Confidentiality**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding confidentiality as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. § 154.530 (HIPAA) and other state and federal laws.

**B. Definitions**

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

*Confidentiality Agreement:* A statement acknowledging that you have received training on the HIPAA Policies and Procedures, and that you will adhere to the guidelines set out related to confidentiality of program participants protected health information (PHI).

**C. Policy**

Information obtained by DOH employees about individuals receiving services through any DOH programs may not be disclosed without the individual's consent, except as authorized by HIPAA, by law, or as permitted by DOH policy. Information may be disclosed in de-identified form that does not identify the individual.

Employees found to be in violation of this policy will be subject to the appropriate disciplinary action in accordance with the Career Service Act and applicable state administrative rules.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 31**

**TITLE: HIPAA – De-Identification of Protected Health Information**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy and procedure regarding the de-identification of protected health information, as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. §164.514 (HIPAA) and other state and federal laws.

**B. Definition**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

*De-Identified PHI:* Health information that does not identify an individual, and with respect to which no reasonable basis exists to believe that the information can be used to identify an individual.

**C. Policy**

The DOH may use or disclose PHI if it has applied generally acceptable statistical and scientific principals and methods for rendering information not individually identifiable and document there is a very small risk that the information could be used to identify the program participant. The DOH program de-identifying the information will have a means to re-identify the information should they need it.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 32**

**TITLE: HIPAA – Marketing**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding marketing, as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. §164.514 (HIPAA) and other state and federal laws.

**B. Definition**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

*Marketing:* Any communications about a product or service, a purpose of which is to encourage recipients of the communication to purchase or use the product or services.

**C. Policy**

The DOH will adhere to all requirements that allow PHI to be used or disclosed without authorization. The DOH will also give program participants the opportunity to opt-out of any or all "marketing" communications. This provision excludes communications made by a covered entity (health care provider) as part of the treatment of a program participant, or made by the DOH in the course of managing an individual's treatment.

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Doneen B. Hollingsworth  
Secretary of Health

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Date



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**STATEMENT NO. 33**

**TITLE: HIPAA – Minimum Necessary**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy and procedure regarding the minimum necessary standard, as required by the Health Insurance Portability and Accountability Act, 45 C.F.R. §164.514 (HIPAA) and other state and federal laws.

**B. Definition**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

*Minimum Necessary:* Requires the covered entity (health care provider) to make reasonable efforts to limit the use or disclosure of, and requests for, protected health information to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request.

**C. Policy**

The DOH will ensure that all persons providing DOH services have access only to the minimum necessary amount and type of PHI needed to perform the functions for their specific job duties.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 34**

**TITLE: HIPAA – Research**

**ISSUED: August 1, 2005**

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**A. Purpose**

To set forth the Department of Health's (DOH) policy regarding its use of information related to research, as required by the Health Insurance Portability and Accountability Act, 45 CFR §164.512 (HIPAA) and other state and federal laws.

**B. Definition**

*Program Participant:* A person participating or enrolled in one of the department's programs that provides health-related services and collects and maintains protected health information.

*Protected Health Information (PHI):* Individually identifiable health information, including demographic information, such as age, address, and account numbers, and information that relates to a program participant's past, present, or future physical or mental health or condition or related health care services.

*Research:* A systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalized knowledge. The primary purpose is to protect the health of the population through such activities as disease surveillance, prevention and control.

**C. Policy**

The DOH will adhere to requirements related to research as defined in the HIPAA regulations. The DOH will be required to obtain each program participant's voluntary and informed authorization before using or disclosing PHI. The program participant (or personal representative) will also have the right to revoke his or her authorization at any time by providing the proper written notice. De-identified or aggregate information will be used whenever possible to limit the exposure of PHI (see *Administrative Policies and Procedures Statement No. 31*).

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 35**

**TITLE: HIPAA – Sanctions**

**ISSUED: August 1, 2005**

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Any Department of Health (DOH) employee who is found in violation of *Administrative Policies and Procedures Statements Nos. 22 through 34*, inclusive, will be subject to the following sanctions depending upon the severity of the violation:

- a. A verbal warning of the violation, no response required;
- b. A written warning of the minor violation, no response required;
- c. A formal written warning of a serious violation, corrective action plan required; or
- c. Termination of employment with the DOH for blatant violations.

Any disciplinary action taken will be done in accordance with the Career Service Act and applicable state administrative rules.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 39**

**TITLE: Health Alert Network Distribution**

**ISSUED: August 1, 2005**

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By default, Department of Health (DOH) messages distributed to the DOH-BIOTERRORISM email grouping shall be internal. If the message author determines there is a need for wider distribution, the author will forward it to the Health Alert Network (HAN) coordinator. The forwarded message must include specific instructions identifying which HAN mailing lists should receive it and the particular level it should be distributed at (alert, advisory or update).

All messages sent to the DOH-OUTBREAK email grouping are confidential and shall not be forwarded.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

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**STATEMENT NO. 40**

**TITLE: Honorariums**

**ISSUED: August 1, 2005**

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The Department of Health may provide for honorariums to an outside entity if prior approval is obtained from the appropriate Division Director and the department's Finance Officer.

An honorarium is a payment for professional services that were provided in good faith with no expectation of payment. If a rate or fee has been discussed with an individual, this constitutes a consultant service and a contract must be written (see *Administrative Policies and Procedures Statement No. 16*).

Staff with questions regarding this policy should contact the department's Finance Office.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 41**

**TITLE: Information/Lists Distribution**

**ISSUED: August 1, 2005**

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In order to protect the confidentiality of individuals, the Department of Health (DOH) will at no time release information pertaining to individual clients or vital records data in a list form (see *Administrative Policy Statements No. 22 through 35 and 76*).

The DOH does have the ability to generate lists (i.e., licensed health care facilities, campgrounds, restaurants, etc.) which may be shared with external individuals and agencies. Prior approval from the appropriate Division Director shall be obtained before distribution of such lists.

The DOH may recover the costs of generating and mailing lists by charging a fee which will be established by the department's Finance Office. The individual or agency requesting the list shall be advised of the charge and payment must be received before issuing the list. All fees received will be deposited into the department's fee account.

A signed statement must be received by the DOH which states that the receiving individual or agency will not release the list. This statement shall be kept on file in the Finance Office for a period of one year.

If the individual or agency requesting the list is a state agency, the agency shall be billed according to state policy.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 42**

**TITLE: Inventory**

**ISSUED: August 1, 2005**

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A physical inventory of assets with a purchased value of \$5,000 or more must be completed by April 30<sup>th</sup> of each year.

On March 1<sup>st</sup> of every year, a list of inventory items will be sent to each Division Director for review. An individual within each work area will be assigned the responsibility of completing the annual inventory audit. Capital assets on loan within the Department of Health for longer than six months should be transferred to the area using the equipment by completing a Form SDH-12.

The person assigned to complete the inventory must sign the approval/date block stamp on the inventory list prior to submitting it to the department's Finance Office.

The Finance Office will maintain a separate inventory of all departmental computers. The inventory of computers will be conducted on an annual basis in conjunction with the fixed asset inventory.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 43**

**TITLE: Legal Opinions/Interpretations**

**ISSUED: August 1, 2005**

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All requests for a legal opinion and/or interpretation of statute or administrative rule by a Department of Health employee must be approved by the employee's Division Director prior to forwarding the request to the department's legal counsel. Once the department's legal counsel has rendered an opinion or interpretation, it shall be returned to the Division Director for review and discussion with Executive Management if appropriate. In some cases, the Division Director may approve legal counsel returning the opinion/interpretation directly to the employee with a copy or summary provided to the Division Director.

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Doneen B. Hollingsworth  
Secretary of Health

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Date



<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 44**

**TITLE: Legislative Support**

**ISSUED: August 1, 2005**

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**A. Operational Support**

The Division of Administration shall be responsible for the overall coordination of the Department of Health's (DOH) legislative agenda and will serve as the contact to the Governor's Office, state agencies and others regarding legislative matters.

The department shall establish a Legislative Task Force (LTF) which will meet daily during the legislative session to provide input and guidance to the Secretary and Division of Administration on legislative activities. LTF membership shall include the Secretary of Health, the Director of Division of Administration, the Director of the Division of Health and Medical Services, the Director of the Division of Health Systems Development and Regulation, and other DOH staff as appropriate. The department's finance officer and legal counsel will be included in LTF meetings as needed.

The Division of Administration will be responsible for the development of action issues and draft legislation based on input from DOH programs. LTF will review and approve all action issues and draft legislation prior to submission to the Governor's Office. Final deadlines for action issue and legislation submission will be established based on direction received from the Governor's Office. Division of Administration staff will develop bill briefs for all department legislation as well as any health-related bills being introduced by the Governor. All bill briefs will be reviewed and approved by LTF prior to finalizing.

The Division of Administration will obtain committee sponsorship for DOH legislation based on direction received from the Secretary of Health and LTF and ensure that DOH legislation is filed with the Legislative Research Council (LRC) prior to established deadlines. The Division of Administration will work with the Governor's Office to ensure health-related bills being introduced by the Governor are filed as required by LRC deadlines.

Designated Division of Administration staff will be the agency contact for communications with the Governor's Office and will coordinate LTF requirements on a continuous basis. The Division of Administration, with input from LTF, will complete and submit daily agency request forms and respond to requests for information.

The Division of Administration will be responsible for all monitoring functions. This will include obtaining, reviewing and distributing legislative bills to LTF on a daily basis. In addition, Division of Administration staff will track all health-related legislation including monitoring committee and floor activity as necessary. Division of Administration staff will provide a daily report to LTF members on the status of all health-related legislation being followed by the department.

The Secretary of Health will lead the DOH lobbying efforts and will designate other lobbyists as appropriate. The Division of Administration will work with the Secretary of Health's office to ensure that all designated lobbyists are properly registered and receive their lobbyist badges.

**B. Communications with Legislators/Legislative Staff/Lobbyists**

DOH staff must forward all requests for information from LRC, individual legislators or lobbyists to the Secretary of Health and the Director of Division of Administration for coordination with the Governor's Office. The Secretary of Health or Director of Division of Administration will respond in writing to LRC or the legislator.

**C. Staff Participation in Session Activities**

DOH representation during committee and floor activities shall be limited to staff members who are required to be there for purposes of monitoring, lobbying or providing testimony. Any other participation by DOH staff must be pre-approved by the Secretary of Health.

Management team staff shall be available to support legislative functions, especially in those instances where unanticipated issues arise. To accommodate this, Management Team staff shall, to the extent possible, limit travel and personal absences during legislative session.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 45**

**TITLE: Meetings – Beverage/Food Costs**

**ISSUED: August 1, 2005**

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The Department of Health (DOH) may pay for non-alcoholic beverages at DOH-sponsored task force or committee meetings that involve external participants if it is part of the normal room rental charges. This does not include internal or staff meetings unless prior approval is obtained from Executive Management.

Meal costs for DOH-sponsored meetings may be directly billed to the DOH if prior approval is obtained by the appropriate Division Director. Programs wishing to have a meal direct billed to the DOH shall submit a request to their Division Director with the date/time of the meeting, purpose of the meeting, list of attendees, and the vendor to be used. Once approved by the appropriate Division Director, the request must be approved by the Secretary of Health and forwarded to the State Auditor's Office. No arrangements are to be made until a final written approval has been received from the State Auditor. The scheduled meal(s) must fall within established state reimbursement guidelines as well as the following timeframes established by the Board of Finance:

- Breakfast (5:31 a.m. to 7:59 a.m.) – \$5.00 (in-state)/\$8.00 (out-of-state)
- Lunch (11:31 a.m. to 12:59 p.m.) – \$9.00 (in-state)/\$11.00 (out-of-state)
- Dinner (5:31 p.m. to 7:59 p.m.) – \$12.00 (in-state)/\$17.00 (out-of-state)

State employees are not eligible for direct reimbursement of meals if the meeting is within their work area. Taxes are not to be include in the vendor bill. A copy of the approval must be attached to the vendor bill when it is submitted to the State Auditor's Office for payment.

Staff with questions regarding this policy should contact the DOH Finance Office.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 46**

**TITLE: Office Attire**

**ISSUED: August 1, 2005**

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The Department of Health expects its employees to dress in appropriate, professional attire when conducting the business of the State of South Dakota. It shall be the responsibility of all supervisors to ensure that employees of the department are dressed appropriately for the work for which they are assigned.

The following types of clothing or apparel shall not be worn during working hours:

- Sweat clothes, tube tops, exercise clothes, or beach clothes;
- Clothing with inappropriate logos;
- Cut-off shorts, play shorts or other short shorts (dress shorts or tailored shorts are allowed permitting the length is appropriate); and
- Jeans that are tattered or torn.

Supervisors have the authority to further restrict attire standards as appropriate for work activities.

Questions regarding this policy should be directed to the appropriate Division Director.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health</b> <b>Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 47**

**TITLE: Office Environment**

**ISSUED: August 1, 2005**

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Department of Health employees shall comply with the Guidelines for Office Environment which have been established by the Bureau of Administration (BOA). These guidelines are as follows:

- Display/Hanging Items – No papers, post-it notes, maps, jokes, pictures, or any other item may be posted/taped, pinned, or hung on the outside of systems wall panels, in any systems furniture corridor or in any major hallway. Agency posters may be framed and hung in the office areas if approved by the Secretary of Health. Holiday decorations using electricity are not allowed nor are live Christmas trees. Decorations should not block hallways or walkways. The state is not responsible for personal items or decorations brought into the office.
- Plants and Above-Panel Storage – Houseplants and storage or display of items on top of file cabinets, storage bins, or panels is prohibited. No office items should appear above the general eye level of the office panel tops. Plants are allowed but may not be hung from the ceiling or be placed near electrical equipment or on the top of systems furniture file cabinets.
- Signs – BOA is responsible for all interior and exterior signs (on the Pierre campus) and will furnish cubicle nameplate signs for each employee. Signs and nameplates that are not in conformance with the sign policy will be removed.
- Permanent and Exterior Walls/Office Walls – Only framed and matted photos, certificates or artwork may be hung on permanent walls, exterior walls and office walls as approved by the Secretary of Health. The Secretary of Health may give permission for other items to be hung in private offices. Agencies must consult with Buildings and Grounds (773-3344) **before** mounting anything on walls.
- Coffee Pots/Electrical Appliances – Microwave ovens, toasters, small refrigerators, coffee pots and other appliances are not allowed in cubicle spaces. A small refrigerator and/or an office coffee pot is allowed in a common use area of the office. Portable electric heaters are expressly prohibited and will be removed from the office by Capitol Security or custodians.
- Hallways – No furniture, file cabinets, chairs, bookcases, or other items may be stored or used in any corridor or hallway and under no circumstances may fire exits be blocked.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 48**

**TITLE: Personnel – ADA Grievance Procedure**

**ISSUED: August 1, 2005**

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Any person, including employees, recipients of services, contractors, or members of the public, who feel they have been discriminated against by the South Dakota Department of Health (DOH) on the basis of disability, may use this grievance procedure. Use of this grievance procedure does not prohibit an employee of the state of South Dakota from using the existing grievance procedures established in ARSD 55:01:13. Persons who use the grievance procedure set out in this policy should be aware that it may not extend the time limits for filing a complaint with the appropriate federal agency regarding their grievance. Use of this grievance procedure does not prohibit any person from filing a complaint with an appropriate federal entity or pursuing available remedies in court.

Any person aggrieved by an action of the DOH relating to a disability should send a brief description of the incident or policy involved within 45 calendar days of the action giving rise to the grievance to:

ADA Coordinator  
South Dakota Bureau of Personnel  
500 East Capitol Avenue  
Pierre, South Dakota 57501-5070

Within ten working days of the receipt of the written complaint, the ADA coordinator or designee will acknowledge in writing receipt of the complaint.

The ADA coordinator or designee will initially review the issues involved in the complaint to determine whether or not an informal resolution of the complaint is possible, and if so, to arrange such a resolution. If an informal resolution is not possible, the complaint will be investigated to determine its validity. Within 45 days of the receipt of the written complaint, a report of the conclusions reached will be prepared. This will include the options available to the DOH to resolve the issues raised for the consideration of the Secretary of Health.

The Secretary of Health will initiate appropriate steps to implement decisions reached through this process and send a written decision to the individual filing the complaint detailing any actions or proposed actions taken by the department. The written decision will be sent to the individual within 60 days of the department's receipt of the individual's complaint.

Nothing in this policy prevents any individual who believes he/she has a grievance under the ADA from contacting the ADA Coordinator for assistance and informally pursuing resolution of the problems that may arise.

Any timelines established in these procedures may be waived by written mutual consent.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 49**

**TITLE: Personnel – Alternative Work Schedules**

**ISSUED: August 1, 2005**

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Alternative work schedules may be requested in accordance with the State Alternative Work Schedule Policy (available through the Secretary of Health's office). Forms are available to request being placed on an alternative work schedule and for being removed from an alternative work schedule.

General guidelines require that offices will be maintained during the hours of 8:00 a.m. through 5:00 p.m., Monday through Friday (including the noon hour). Rest periods and lunch breaks are a normal part of the work schedule and cannot be accumulated or be included as a basis for a flexible work schedule. No work schedule will be implemented that does not provide the employee with at least a 30-minute meal break for any work day longer than six hours.

Not every function or position is conducive to flexible work scheduling because of service requirements. Supervisors shall:

- Ensure adequate, not minimal, staff is available to serve the needs of the public and administration. Both internal and external "customer" needs should be considered to determine adequate staffing.
- Ensure alternative work schedules are administered consistently and equitably.
- Ensure alternative work schedules do not cause or contribute to the need for additional staff or overtime work. The maximum scheduled hours in a work week must not exceed 40 hours.
- Ensure work that requires regular supervision or essential interaction with other staff is scheduled when supervisors and interacting staff are available.

Employees shall:

- Plan and organize their time to meet the job requirements established by their supervisor.
- Participate in the resolution of conflicts between the job and the alternative work schedule and inform the supervisor when coverage is not adequate.
- Be able to meet workload requirements and be available for scheduled conferences and meetings. The requirements of the job always take precedence over the alternative work schedules. However, efforts should be made to schedule meetings and conferences during the core period.
- Not engage in excessive socializing prior to the beginning of the workday when employees are already engaged in their work schedule. This can be disruptive to the work patterns of employees with earlier starting times.

*A Request for An Alternative Work Schedule (AWS)* form must be completed by the employee and submitted to the appropriate Division Director for approval. The supervisor should send a



copy of the approved form to the Human Resource Manager to be placed in the employee's personnel file. To ensure an opportunity for all employees to request an alternative work schedule and to ensure the schedule remains workable for the employee and the office, requests must be submitted and reevaluated three times a year for the following time periods:

- January, February, March, April, and May;
- June, July and August; and
- September, October, November, and December.

All employees on flexible work schedules are required to work during the core hours of 9:00 a.m. to 3:30 p.m. unless on approved leave or work adjust. Employees on a flexible work schedule may not work before 7:00 a.m. or after 6:00 p.m. The following flexible work schedules are available:

**One Hour Lunch Break**

7:00 a.m. to 4:00 p.m.

7:30 a.m. to 4:30 p.m.

8:30 a.m. to 5:30 p.m.

9:00 a.m. to 6:00 p.m.

**½ Hour Lunch Break**

7:00 a.m. to 3:30 p.m.

7:30 a.m. to 4:00 p.m.

8:00 a.m. to 4:30 p.m.

8:30 a.m. to 5:00 p.m.

9:00 a.m. to 5:30 p.m.

With supervisory approval, full-time hourly and salaried employees may work a compressed work schedule and work their normally scheduled number of hours each work period in less than five days (i.e., four 10-hours days or four 9-hour days and one 4-hour day). Since full-time employees are entitled to a maximum of 8 hours for a holiday, hourly employees working a compressed work week may be required to adjust their work week or take paid or unpaid leave during a work period that includes a holiday. Salaried employees must have a set schedule and take leave for any day in which they will be absent during all scheduled hours regardless of the number of hours worked during the week. Salaried employees on a compressed work schedule may be required to work additional hours or adjust their schedule to meet the requirements of their position.

Alternative work schedules do not alter the responsibility and authority of supervisors to establish and change work schedules without prior notice. Supervisors may discontinue or temporarily suspend alternative work schedules when necessary. Alternative work schedules may also be altered if work needs change or if service is impaired.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 50**

**TITLE: Personnel – Announcement Requests**

**ISSUED: August 1, 2005**

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All requests to fill positions should be submitted to the Department of Health's Human Resources Manager. All requests to fill a position must be approved by the Division Director prior to submission to the department's Human Resources Manager.

All advertising for positions must be handled through the department's Human Resources Manager. Requests to advertise positions shall include position number to be announced, name of newspaper or media to be used, and length of time the advertising should run. Comments pertinent to the position not covered under general job specifications should be included with the request.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 51**

**TITLE: Personnel – Bloodborne Pathogens Exposure**

**ISSUED: August 1, 2005**

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In the interest of the health and safety of employees, patients and clients, all needle-stick, puncture wounds and exposure to mucocutaneous blood and/or body fluid must be reported as specified by *Administrative Policies and Procedure Statement No. 65*.

In addition, individual occurrences will be managed in accordance with the state's post-exposure protocol (available through the Office of the Secretary of Health). This includes all occurrences experienced by Department of Health employees and patients or clients of the department.

All supervisors whose employees are subject to needle-sticks, puncture wounds and exposure to body fluids will make this policy available to their employees upon appointment.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 52**

**TITLE: Personnel – Hiring**

**ISSUED: August 1, 2005**

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Upon completion of interviews of certified eligibles, references must be checked. No candidate shall be notified of his/her appointment until such time as the selection has been approved by the appropriate Division Director. The Division Director or his/her designee shall immediately notify the Department of Health's Human Resources Manager of the candidate selected.

The appropriate Division Director has the authority to approve starting salaries up to 25 percent of the pay grade and salary offers above 25 percent must have prior approval of the Commissioner of the Bureau of Personnel.

New employees shall be hired at the beginning of a pay period to assure adequate time to enter the new employee into the payroll system and the insurance program. Any exceptions to hiring at the beginning of the pay period must be approved by the department's Human Resources Manager. The department's Human Resources Manager must be notified of any intent to hire temporary, emergency or seasonal employees.

The Requisition List ~~Certification of Eligibles~~ form and all materials pertinent to the selection process, applications, interview questions, interview notes, reference questions, reference notes, etc. must be completed and returned to the Human Resources Manager. The materials relating to each selection will be maintained by the Bureau of Personnel (BOP). Upon receipt of the Requisition List ~~Certification of Eligibles~~, appropriate letters will be sent to all applicants by BOP. The official letter of appointment and employment forms will be issued to the new employee.

BOP will send employment forms to the supervisor prior to the employee's first day or will schedule an orientation session with the employee. Employees should review and complete the employment forms on the first day of work. Employment forms must be returned to the department's Human Resource Manager promptly to ensure the first paycheck arrives on time. This also applies to temporary, emergency and seasonal employees as well as interns.

Supervisors shall assure that all new employees, including seasonal employees and interns, complete the required Health Insurance Portability and Accountability Act (HIPAA) orientation on the BOP intranet web site ([www.state.sd.us/bop](http://www.state.sd.us/bop)). Supervisors shall also arrange for additional training on HIPAA policies and procedures for those employees who will be creating, receiving or distributing protected health information.

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Doneen B. Hollingsworth

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Date

Secretary of Health

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 53**

**TITLE: Personnel – Inclement Weather**

**ISSUED: August 1, 2005**

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As mandated by state policy, Department of Health (DOH) offices will remain open on all work days, regardless of the weather. The Secretary of Health will determine the staffing levels needed during inclement weather. If inclement weather threatens or occurs, employees who do not report to or remain at their work site may be absent with the prior approval of their supervisor.

In cases where the state does not control the building in which a state office is located, state managers should work with the building owners or lessors to establish a procedure which ensures DOH employees access to state offices in order to remain open at least for communicating with the public and handling administrative duties.

Employees who do not work due to inclement weather may request approval to:

- Adjust their work week;
- Take annual leave; or
- Take leave without pay.

This policy is effective even if no employee can reach the work site.

If no employee can reach the work site, the office supervisor shall notify the state office. The Secretary of Health must approve the closing of any office outside the Pierre area. The Secretary is responsible for assuring that local radio stations announce that DOH offices are not currently staffed. The Secretary will continuously re-evaluate weather conditions during the day so the office can conduct business as soon as possible.

The Governor will determine whether state government offices in Pierre will be staffed and will notify local radio stations.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 54**

**TITLE: Personnel – Organizational Charts**

**ISSUED: August 1, 2005**

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The Department of Health's Human Resources Manager shall maintain the official department organizational chart which will include each position, employee name, job title, pay grade, position number, and office location. The Human Resources Manager will provide Division Directors with copies of their respective areas. No organizational chart may be distributed that includes paygrade information.

Any structural changes to an organizational chart must be approved by the Secretary of Health and the Commissioner of the Bureau of Personnel.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 55**

**TITLE: Personnel – Outside Employment**

**ISSUED: August 1, 2005**

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Employees of the Department of Health may take outside employment provided, in the opinion of their supervisor and the Division Director, there is no conflict with working hours, the employee's efficiency or the interests of state government. Employees of the state may not engage in outside business or personal activities while on duty, nor may government property be used for anything but government functions.

An employee requesting approval for outside employment shall submit a written request through their supervisor to the Division Director. The request should include a description of the outside job, including duties, working hours and number of hours to be worked per week. A request form may be obtained from the department's Human Resources Manager or at n:/form/outside.doc (Central Office) and x:/form/outside.doc (Field Offices).

Approval may not be granted for paid professional activities or employment in which the employee could be assumed to be functioning as a representative of the department or where the activities could be perceived as conflicting with the regulatory duties of the department.

A copy of approved requests shall be submitted to the department's Human Resources Manager to be placed in the employee's personnel file.

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Doneen B. Hollingsworth  
Secretary of Health

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Date



<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 56**

**TITLE: Personnel – Overtime Work and Compensation**

**ISSUED: August 1, 2005**

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**A. Hourly Employees Eligible for Overtime Compensation**

All Department of Health (DOH) employees eligible for overtime compensation are considered hourly employees. Hourly employees who work overtime shall be paid at the rate of time and one-half for hours worked in excess of 40 hours per work week. Requests for overtime must be sent to the department's Human Resources Manager who will secure the approval of the Commissioner of the Bureau of Personnel (BOP) before the employee works overtime hours. Overtime payments must be reported and justified. With the exception of Correctional Health Care staff, the work week shall begin at 12:00 midnight on Saturday and end at 11:59 p.m. the following Friday.

1. Overtime Pay – Overtime for hourly employees covered by the Fair Standards Labor Act (FSLA) will be calculated on actual hours worked in excess of 40 hours in a work week and payable at a rate of time and one-half. Hourly employees will either have their work week adjusted or be paid for overtime at the end of the work week when an overtime situation occurs. Employees and managers are expected to adjust the work week whenever possible to avoid overtime liability. An employee's work schedule shall only be adjusted in the same week in which the overtime situation occurs. Overtime hours can only be carried into another week in the same pay period with approval from the Human Resource Manager.
2. Leave Time – Holiday hours, annual leave, sick leave, court and jury leave, personal leave, military leave, and any other leave time will not be counted as hours worked for overtime purposes. When a combination of hours worked and leave taken total more than 40 hours in a week, the employee may elect to have their vacation or sick leave adjusted rather than receiving straight time payment. This practice is applied on a work week basis only. Once 40 hours of work or paid leave is accumulated for the week, the employee will be sent home or overtime will be requested.

Employees who are military leave or court and jury leave will be paid the leave hours at straight time irrespective of other hours worked during the week. The leave time will not be counted as hours worked. Employees may, at the discretion of their supervisor, be required to report to work during hours outside of the military or court and jury leave.

3. Administrative Leave – Employees who are on administrative leave will be paid the leave hours at straight time irrespective of other hours worked during the week. Administrative leave will not be counted as hours worked. If an office is administratively closed and an hourly employee is required to work, the employee must be granted either time off in the same work week for the hours the office was closed in addition to the payment for actual hours worked or straight time pay for the hours the office was closed in addition to

payment for actual hours worked. If an employee is not required by management to work when an office is administratively closed but reports to work on his/her own initiative, administrative leave will not be allowed. The employee will receive payment for the hours worked.

4. Holiday Hours Used in Computation of Overtime – All hourly employees who work at least one day or are on paid leave during the calendar week in which a holiday falls are eligible for holiday pay. For payroll purposes, a holiday is no more than 8 hours. An employee who is on leave without pay during the week when a holiday occurs will not receive holiday benefits. Employees who work less than full time shall be given prorated holiday pay, determined by calculating an average for the past five pay periods. If an employee begins employment after a holiday, no payment may be made for the holiday.

Any employee who is required to perform work or to render services on a holiday shall be compensated by receiving an equal time off within the pay period or at a later date or a cash payment at the employee's regular hourly rate.

5. Inconvenience Pay – Hourly employees who have completed their normal shift and left the work place for their residence and are unexpectedly required to return to work prior to the start of their next regular shift are guaranteed a minimum of three hours pay regardless of hours actually worked. Employees who are called in prior to the beginning of their scheduled shift and who are allowed to continue working through the shift are not eligible for inconvenience pay. Only the hours actually worked are used in determining when time and one-half is due. Inconvenience pay hours, up to three hours, that are not worked are paid at straight time and are not part of the hours used for calculating time and one-half payment.

Inconvenience pay does not apply if the employee is not required to actually leave his/her residence for the work site. For example, employees who can deal with a problem on the phone without leaving their residence are not eligible for inconvenience pay. The time spent at the residence dealing with the problem is considered hours worked.

6. On-Call Time – Time spent on-call is considered hours worked if the employee is required to remain on the employer's premises or at a location specified by the employer. Employees who use beepers are not considered to be working and the hours are not compensable. When employees are called out on a job assignment, only the time actually spent working is considered as hours worked. If calls to perform work are so frequent or the readiness for work conditions are so restrictive that the employee is not free to use the intervening periods effectively for his/her benefit, the time must be considered hours worked.
7. Job-Related Training – Attendance at job-related conferences, workshops, meetings, or classes for which the department pays for travel expenses, registration fees or tuition, or for which the employees are not required to take annual leave, leave without pay or adjust work schedules is considered hours worked. Reduced tuition allowed pursuant to SDCL

3-20-1 does not constitute proof of job-relatedness for the purposes of calculating hours worked.

8. Travel Time – Time spent in travel will be counted as hours worked. Layovers at airports where the employee is not free to pursue personal interests is also included as time spent in travel and must be counted as hours worked. Actual meeting time outside of the normal work schedule is also considered as hours worked. Hours in which the employee is free to do as they please and time spent relaxing, sleeping or dining are not compensable. Social activities at conferences outside of normal working hours are not considered as work time unless the employee has been directed by management to attend the activity for the purpose of fulfilling work-related functions.
9. Record Keeping – All hourly employees will maintain and submit complete records of hours worked and leave time taken. The records should reflect the date, number of hours worked and leave time taken for each pay period.

#### **B. Salaried Employees Not Eligible for Overtime**

Employees who are exempted from FLSA are considered salaried employees and are not eligible for additional compensation based on hours worked over 40 hours a week. With the exception of Correctional Health Care staff, the work week for salaried employees shall begin at 12:00 midnight on Saturday and end at 11:59 p.m. the following Friday.

1. Leave Deductions for Partial Day Absences – Salaried employees will not be allowed to take annual, sick or personal leave in less than one-day increments. Salaried employees may leave the work site for less than one day and need not take leave for the time. If the employee is absent from the job for the entire day, leave must be taken.

Salaried employees will be allowed to adjust their work week to meet the demands of the position with the prior approval of their supervisor. Supervisors are expected to set the normal working hours and approve time away from the job for salaried employees whether or not leave is taken or not. Salaried employees are expected to be available to the public, co-workers and subordinates during the normal working day. Before time away from the job is approved, management and salaried employees are expected to ensure the needs of the public and other state employees who depend on the salaried employee can be reliably met.

2. Family and Medical Leave – Salaried employees who are eligible for family and medical leave may have leave deducted in less than one-day increments. This applies to leave which qualified as family and medical leave under Federal law and ARSD 55:01:22:08:02. If a salaried employee's accrued paid leave is exhausted, leave taken under Family and Medical Leave Act may be unpaid. Deductions of less than one day due to any purpose other than family and medical leave are not permitted.
3. Court and Jury Leave – When a salaried employee is on court and jury leave, no deductions from salary are made. ARSD 55:01:22:05 allows employees to be absent from work with no loss of leave credits or deductions from salary.

4. Military Leave – Salaried employees who are ordered to additional military training after exhausting their annual 15-day military training leave bank and who have worked during the department’s established work week will not have deductions made from pay. Deductions in pay for military training purposes will not be made in less than one-week increments and will be made only if the employee has not worked or been on paid leave during any part of the established work week. This policy applies to military training leave define in SDCL 2-6-22.
5. Deductions from Pay Due to Disciplinary Action – A salaried employee's pay may not be reduced in less than one-week increments as a result of a disciplinary action. The only exception to this policy is if the disciplinary action is due to a major safety violation as defined under FLSA.
6. Holiday Pay – For salaried employees, the salary includes both holiday hours and hours worked. A salaried employee who is on leave without pay during the week when a holiday occurs will not receive holiday benefits. Employees who are newly hired into the system and who begin work the day after the holiday will not receive the holiday pay.
7. Travel Time – Time spent in travel will be counted as hours worked. Layovers at airports where the employee is not free to pursue personal interests is also included as time spent in travel and shall be counted as hours worked. Actual meeting time outside of the normal work schedule is also considered as hours worked. Hours in which employees are free to do as they please and time spent relaxing, sleeping and dining are not compensable. Social activities at conferences outside of normal working hours are not considered as working time unless the employee has been directed by management to attend the activity for the purpose of fulfilling a work-related function.
8. Record Keeping – A salaried employees compensation is not determined by the total number of hours worked but the expected work period of a salaried employee generally consists of 80 hours every two weeks. All salaried employees will keep and submit complete records of hours worked and leave time taken. The records will reflect the date, number of hours worked and leave time taken for each pay period.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 57**

**TITLE: Personnel – Performance Planning and Review**

**ISSUED: August 1, 2005**

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The Department of Health has a formal Performance Planning and Review (PPAR) system for its employees. The overall objective of the PPAR system is to provide an avenue of two-way communication by which employees and their supervisors can discuss mutual expectations, review performance and plan for future goals. PPAR sessions are held annually based on the employee's anniversary date of hire. Probationary employees are required to have PPAR reviews at three months and five months of their hire date.

The employee shall be given sufficient time, approximately two weeks, to review the PPAR document and complete the employee section prior to the scheduled performance review. The PPAR document shall be signed by the employee the employee's immediate supervisor and the next-level supervisor. The original, signed PPAR document shall be sent to the department's Human Resource Manager to be placed in the employee's personnel file.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 58**

**TITLE: Personnel – Personnel Files/Release of Information**

**ISSUED: August 1, 2005**

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Each employee's personnel file shall be maintained by the Department of Health's Human Resources Manager. Records are hard copy, microfilm and automated and include copies of applications, performance review documents, commendations, records of disciplinary actions, and other pertinent information. It is the responsibility of the employee's supervisor to forward the appropriate information to the department's Human Resources Manager.

Supervisors may review position history files or performance files. An employee may review their personnel file. The review shall be done in confidence and with the Commissioner of the Bureau of Personnel or a designee. An employee has the right to obtain a copy of the contents of their personnel file or any other pertinent data that directly relates to the employee held in the file. The cost of the copy shall be borne by the employee.

All personnel records pertaining to applications for employment, investigations, performance appraisals, donation or receipt of vested leave, and competitive examination materials are confidential. An employee's name, classification and salary may be released to an individual upon written request. Additional information may be released if the request is accompanied by an authorization signed by the employee. Lists of employees with their home or office locations or other statistical compilations may only be released for legitimate state government purposes.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 59**

**TITLE: Personnel – Professional License Verification**

**ISSUED: August 1, 2005**

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Each Division Director must verify that assigned staff members who are required as a condition of employment to have a professional license or certification maintain such license or certification in good standing. The Department of Health's Human Resources Manager may audit for compliance.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 60**

**TITLE: Personnel – References**

**ISSUED: August 1, 2005**

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References must be checked for all top candidates for employment with the Department of Health prior to an offer of employment being made.

All applicants interviewed by the DOH should fill out the "Authorization of Release of Information for Reference Checks" form.

In requesting reference information, all efforts should be made to talk to the applicant's immediate supervisor. If the immediate supervisor is unavailable, the closest member of management to the immediate supervisor is appropriate. Co-workers may be utilized as supplemental information but should not be the primary or only reference contact (unless no other reference options are available).

The names of applicants who are current state employees or have been employed previously in state government should be forwarded to the department's Human Resources Manager as soon as possible so that state government employment history and work references can be checked. All applicants without state government employment experience should be forwarded to the department's Human Resources Manager if an employment offer is being considered.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 61**

**TITLE: Personnel – Resignations and Terminations**

**ISSUED: August 1, 2005**

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Copies of all letters of resignation must be submitted immediately to the Department of Health's Human Resources Manager so the necessary termination papers may be issued. Employees must give a minimum of ten working days notice except for unusual circumstances in which the supervisor approves less notice.

A probationary employee may be terminated during the six-month probationary period. However, the Division Director and the department's Human Resources Manager must be notified when the employee's immediate supervisor is considering termination prior to any action taking place. The Division Director must approve the termination and the employee must be notified in writing.

It is the supervisor's responsibility to assure that all department keys, security cards, cell phones, laptop computers, personal digital assistants (PDAs), telephone credit cards, records, and state identification in the possession of the terminating employee are returned no later than the employee's last working day.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 62**

**TITLE: Personnel – Smoking by Employees**

**ISSUED: August 1, 2005**

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Smoking is prohibited in all buildings or portions thereof leased or occupied by the Department of Health and in all vehicles owned by the State of South Dakota. The Secretary of Health is responsible for monitoring and controlling the smoke-free environment.

Signs shall be posted at all entrances and exits of leased or occupied buildings stating that the building is smoke-free and smoking is prohibited. Standard signs shall be obtained from the Bureau of Administration.

The Secretary of Health shall designate an outdoor smoking area for each department-leased or occupied building or office. Department employees shall refrain from smoking in areas other than the designated smoking area and shall limit smoking to the standard break periods authorized by *Administrative Policies and Procedures Statement No. 63*.

Violation of this policy may result in corrective and/or disciplinary action.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 63**

**TITLE: Personnel – Time and Attendance**

**ISSUED: August 1, 2005**

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Standard office hours for the Department of Health will be Monday through Friday from 8 a.m. to 5 p.m. with one hour off for lunch. One 15-minute break period is allowed every four hours if an employee's workload permits. Breaks are not guaranteed and an employee must remain available and accessible during breaks to provide for the needs of the department. The respective Division Director retains the right to schedule work, work periods and break times. Alternative work schedules must have approval by the appropriate Division Director in accordance with *Administrative Policies and Procedures Statement No. 49*. Any adjustment of the standard work week or approved alternate work schedule must be in accordance with the general provisions of *Administrative Policies and Procedures Statement No. 56*.

Time and attendance showing the time worked and the time absent shall be entered by each department employee using the standard electronic time form. All timesheets must be entered by the deadlines established by the Bureau of Personnel. Employees on approved leave should enter their hours and sign their timeform before going on leave if at the end of the pay period.

It is the supervisor's responsibility to review timesheets for accuracy. Approval of the submitted electronic time forms certifies that the number of hours reported are accurate.

All supervisors should select an alternate. If the supervisor will be absent, the supervisor should activate the alternate.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 64**

**TITLE: Personnel – Training Course Approval**

**ISSUED: August 1, 2005**

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Any employee wishing to participate in a training or conference opportunity that requires a registration fee or is not sponsored by the Bureau of Personnel (BOP) or the Bureau of Information and Telecommunications (BIT) must receive prior approval from BOP. Requests for BOP approval shall be submitted on the standard *Job Related Training and Education* form (available on n:/form/trnreq.doc) at least three weeks prior to the date of the training to their immediate supervisor for approval. If the training/conference is offered out-of-state, the appropriate Division Director shall have final approval. Once final approval is obtained, the training request shall be forwarded to BOP for approval/denial. BOP will then return the request to the employee who must work with the department's travel coordinator to log the request into the department's travel system.

Training/conferences not requiring a registration fee need only have approval by the employee's immediate supervisor (and appropriate Division Director if offered out-of-state). The approved training request shall be forwarded to the department's travel coordinator to be logged into the department's travel system.

Employees wishing to participate in a training course offered by BOP should obtain approval from their immediate supervisor. Once approval is obtained, the employee shall submit the training course registration form via e-mail directly to TRAINING REGISTRATION (BOP) mailbox. A copy of the training course registration form can be found at n:/form/trnreq.doc (Central Office) or x:/form/trnreq.doc (Field Offices).

Within six months of appointment to a supervisory position, an employee must complete 40 hours of training in the South Dakota performance planning and review system and basic supervision courses offered through BOP. Within three years of appointment to a supervisory position, the employee must complete an additional 40 hours of supervisory or management training approved by BOP. Requests for credit to be given for previous training must be submitted to BOP for approval.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 65**

**TITLE: Personnel – Workers Compensation**

**ISSUED: August 1, 2005**

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When an employee is injured or contracts an occupational illness as the result of, and in the course of employment, the employee has three business days to notify their supervisor of the injury or illness. The Department of Health has seven ~~business~~ calendar days (not including Sundays and holidays) to complete the *Employer's First Report of Injury* form and file it with the Bureau of Personnel.

Supervisors should ensure that employees are aware of the proper procedure for reporting work-related injuries and illnesses. All work-related accidents and injuries should be reported even if immediate medical attention is not needed.

The *Employer's First Report of Injury* form can be completed and submitted at <https://www/state/sd/us/application/eb05fro/secure.asp>.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 66**

**TITLE: Policy Manuals**

**ISSUED: August 1, 2005**

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**A. Administrative Policies and Procedures**

The Director of the Division of Administration will review all existing administrative policies and procedures or proposed new administrative policies or procedures for appropriateness on an ongoing basis. Policies will be updated at least annually or more often as necessary. As Department of Health (DOH) policies and procedures are updated or added, the Director of Division of Administration will notify all department staff via e-mail.

Administrative policies and procedures will be accessible to all department staff via the DOH intranet found under "Resources" at [www.state.sd.us/doh](http://www.state.sd.us/doh). The Secretary of Health shall approve and sign all department administrative policies and procedures and the original copy shall be maintained in the Office of the Secretary. Only copies of the signed original may be distributed to external individuals or groups. All department staff shall be familiar with and comply with all department policies and procedures.

**B. Program Policies**

Each Division shall maintain the original hard copy of the policies and procedures necessary for carrying out their respective program activities. The appropriate Division Director will review all existing program policies and procedures or proposed policies or procedures for appropriateness on an ongoing basis. Policies will be updated at least annually or more often as necessary. The appropriate Division Director will be responsible for making these policies and procedures accessible to program staff. All program staff shall be familiar with and comply with all program policies and procedures. These manuals must be reviewed and updated annually.

**C. Final Approval**

The Secretary of Health has final authority for approval of all department policies and procedures.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 67**

**TITLE: Purchases**

**ISSUED: August 1, 2005**

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Purchasing cards are to be used to purchase supplies or capital asset items of less than \$1,000. Orders may not be divided to avoid the transaction limit. Each Division shall have an assigned card holder for purchases.

Purchasing cards may be used for contract and non-contract items. However, if the needed item is on contract, it must be bought on contract. Printing orders of less than \$500 may be charged on the card. Purchasing cards may not be used to purchase computer supplies or equipment, services, fuel, registration fees, or travel-related items.

Three quotes must be obtained for non-exempt (medical) or non-contract items over \$500. The quotes must be forwarded to the appropriate card holder who will forward them to the Finance Office along with the credit card invoice.

For purchases over \$1,000, a purchase order must be prepared on the Department of Health's electronic purchase order system.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 68**

**TITLE: Records Management**

**ISSUED: August 1, 2005**

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All Department of Health records must be retained or destroyed in accordance with the Bureau of Administration's Record Retention and Destruction Schedule Manual. A retention schedule shall be developed for any new program record that is not already identified in the manual. State law, federal regulations and department policy will be used to determine the length of retention. Length of retention determines if records will be stored or microfilmed.

All requests for records retention must be routed through the Finance Office to assure compliance with storage and microfilm policies.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 69**

**TITLE: Reporting Procedures**

**ISSUED: August 1, 2005**

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An employee of the Department of Health (DOH) shall immediately report any:

- injury to person or property;
- violation of law;
- violation of DOH, Department of Corrections or other State policy;
- professional misconduct; or
- other incident which may expose the DOH or the State of South Dakota to liability.

Such report shall be made directly to the employee's immediate supervisor. If the incident or violation to be reported involves the employee's immediate supervisor, the employee shall report the incident or violation to their supervisor's immediate supervisor or the department's Human Resources Manager.

Reporting under this policy does not satisfy any other obligation of the employee to report an incident to law enforcement, professional board or other entities under the requirements of any applicable law. The employee's obligation to report does not require disclosure of any information otherwise privileged or confidential under applicable law.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 70**

**TITLE: Risk Management**

**ISSUED: August 1, 2005**

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The Division of Administration is the Department of Health's contact with the Office of Risk Management. All questions regarding risk management policies should be directed to Jerry Hofer at 773-3361. Questions concerning bad debts should be directed to Tracy McFarland at 773-6417 and accident reporting should be directed to Denise Trebesch at 773-3877.

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Doneen B. Hollingsworth  
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**STATEMENT NO. 71**

**TITLE: Solicitation**

**ISSUED: August 1, 2005**

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Commercial vendors may not solicit business on state property or solicit Department of Health employees during working hours. Working hours include breaks and lunch periods if the employee is on state grounds.

Employees may solicit for charitable purposes using their own time by adjusting their work week to make up the time or by using annual leave or leave without pay. Activities should be scheduled so that the soliciting employee does not interfere with coworkers' performance. As with other community activities, employees should be allowed to participate using their own time if their schedules allow and if prior approval is obtained from their supervisor.

In keeping with state policy, United Way activities will be unchanged by this policy.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 72**

**TITLE: Surveys**

**ISSUED: August 1, 2005**

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Any Department of Health program proposing to conduct a survey must contact the Office of Data, Statistics and Vital Records for assistance in developing a statistically valid survey instrument which will meet program objectives.

Prior to the development of a new survey, the Office of Data, Statistics and Vital Records shall determine if the needed data can be obtained from an existing survey or modification of an existing survey.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 73**

**TITLE: Telephone Use**

**ISSUED: August 1, 2005**

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Department of Health (DOH) employees shall not use, or permit others to use, the state telephone network for any purpose other than official state business, except:

- For an emergency;
- For notification of a change in the employee's work schedule; or
- For immediate family concerns.

If the telephone call involves long distance charges, the employee shall pay for the call. Under no circumstances are DOH employees allowed to use the state's communication system to engage in outside business interests or for inappropriate, offensive or illegal activities. Abuse of the system is not acceptable. Employees should not expect privacy or confidentiality when using state resources. Employees should use common sense. If in doubt, do not use state resources.

The Finance Office will monitor the use of all state telephones within the DOH on an ongoing basis. An employee who is identified as violating the state telephone policy will be subject to disciplinary action in accordance with ARSD 55:01:12.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 74**

**TITLE: Time Study**

**ISSUED: August 1, 2005**

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Each supervisor will ensure that any employee paid from more than one fund source, if one of the sources is a federal source, is either on a time study or part of the indirect cost pool. All staff completing time studies must code leave of any type to the Administrative fund source on the time study package. Time study documentation must be available for audits conducted by Legislative Audit or other approved auditors.

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Doneen B. Hollingsworth  
Secretary of Health

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**STATEMENT NO. 75**

**TITLE: Travel**

**ISSUED: August 1, 2005**

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**A. In-State Travel**

All requests for in-state travel require the approval of the immediate supervisor or designated travel coordinator prior to the travel taking place. Supervisors shall promote travel coordination within the Department of Health (DOH). When scheduling meetings throughout the state, programs should consult with the department's travel coordinator in order to promote staff car pooling.

**B. Out-of-State Travel**

Requests for out-of-state travel should be submitted by the employee to their immediate supervisor at least two weeks prior to the travel taking place. If approved, the supervisor will submit the request to the appropriate Division Director for approval. Once approved, the request will be submitted to the department's travel coordinator. If the lodging rate exceeds the out-of-state per diem rate, it must be indicated on the request form and approved by the department's Finance Officer.

When approving out-of-state travel requests, the following criteria shall be considered:

- Necessary to get required training;
- Grant requirement;
- Part of participation as a board/commission member; or
- Critical for support of DOH priorities.

If an employee leaves the weekend before or returns home the weekend after out-of-state travel to take advantage of cheaper airline rates, the extra days involved will not be considered working time.

Non-state employees who are traveling at the request of, or whose travel is being paid for by, the DOH must follow the same procedure for submitting an out-of-state travel request (above) for approval prior to the travel taking place. Reimbursement for non-state employees will be paid once travel is completed.

**C. Travel Outside the Continental United States**

Requests for travel outside of the continental United States must be submitted by the employee to their immediate supervisor at least three weeks prior to the travel taking place. If approved, the supervisor will submit the request to the appropriate Division Director for approval. The Division Director will submit the request to the Secretary of Health for approval. Once approved by the Secretary of Health, the request must be submitted to the Governor's Office for final approval. Any request submitted less than three weeks prior to travel must be accompanied by a

written justification. If an excessive lodging rate is being requested, it must be indicated on the request form and approved by the department's Finance Officer.

**D. Travel Reimbursement**

Travel expenses must be submitted for reimbursement at least quarterly, using fiscal quarters, unless a program policy states a voucher shall be submitted more frequently. Any voucher submitted in non-compliance with this policy may not be accepted for payment.

**E. Travel Advances**

Travel advances are available for out-of-state travel for which anticipated travel expenditures are greater than \$2,000. The Division Director and the Finance Officer must approve requests for advance travel. Submission for advance travel should be made at least two weeks prior to the travel date of departure to insure payment is received. Repayment of the advance must be made within two weeks of the return date of the trip. Failure to comply will result in the advance being withheld from the employee's next paycheck and may affect access to future advances.

**F. Reimbursement for Attendance by Request**

When DOH staff are requested by federal or other non-state agencies to attend conferences, meetings or training sessions and the non-state agency is responsible for any costs associated with the trip, the trip must be approved as outlined in section A. and B. above.

It is recommended that the employee work directly with the federal/non-state agency or third party payor to negotiate prepayment of travel expenses (i.e., transportation and lodging) prior to committing to make the trip in order to avoid incurring a large amount of out-of-pocket costs. If the federal agency or third party payor does not prepay transportation and lodging costs, the employee must decide whether or not to attend. Advance travel for this type of arrangement is not possible within the state system so the employee will be responsible for payment of expenses incurred.

If it is determined that the trip is essential to the support of department priorities and reimbursement by the federal or non-state agency isn't possible, the Division Director or Secretary of Health may authorize payment for the trip from department resources.

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Doneen B. Hollingsworth  
Secretary of Health

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Date



<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 76**

**TITLE: Vital Records – Availability of Records**

**ISSUED: August 1, 2005**

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**A. Availability of Individual Records**

Certified vital records are subject to SDCL 1-27-1 and must be made available to any person who meets the criteria established by SDCL 34-25-52.

**B. Publication of Vital Records Data**

Published information of vital records may not contain any information which would identify an individual who is or was a participant in a vital event (i.e., birth, death, fetal death, abortion, marriage, or divorce). All published data must be presented in such a statistical manner that no person can be identified. Cells with less than three events must be suppressed.

**C. Request for Vital Records Information**

Federal, state, local, and other public or private agencies may, upon request, be furnished with blocks of vital records data upon specific terms or conditions as may be prescribed by the Secretary of Health (see SDCL 34-25-52.1). Before approving health-related requests for a block of vital records data, the Secretary of Health may require any or all of the following information:

- A statement of confidentiality signed by the person/agency requesting the data;
- A statement as to the purpose for which the data will be used;
- A statement that the data will not be released or used by any person or organization other than the person or organization requesting the data;
- A statement as to how the data will be disposed of after use;
- A statement that data provided will be available to authorized personnel only;
- A statement that data not being actively used will be stored in a secure location to protect confidential status; or
- A statement that the requestor agrees to pay for the actual costs associated with fulfilling the data request.

In cases of non-health-related requests, bulk vital records data will receive the lowest priority, on a time available basis.

**D. Requests for Individual Birth Certificates for Medical Research Purposes**

The DOH may provide researchers the medical information from an individual's birth certificate if the researcher provides the following:

- A research protocol explaining that the information will only be used for medical research purposes;
- A signed release, on a form provided by the DOH, for each person whose record is being requested; and

- The search fee for each record requested.

Requests must be submitted to the Secretary of Health for approval.

All requests must be made in accordance with federal Health Insurance Portability and Accountability Act (HIPAA) standards and meet guidelines established by DOH.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 77**

**TITLE: Vital Records – Fee Accounting Refunds**

**ISSUED: August 1, 2005**

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Refunds will be issued for the following reasons only:

- The request cannot be satisfied because of an out-of-state event (i.e., birth, death, marriage, or divorce);
- An overpayment is received; or
- The individual cancels the request prior to being mailed.

All refunds must be made within 30 days of receipt of cash.

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Doneen B. Hollingsworth  
Secretary of Health

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Date

<p style="text-align: center;"><b>South Dakota Department of Health Administrative Policies and Procedures</b></p>
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**STATEMENT NO. 78**

**TITLE: Vital Records – Use of Files**

**ISSUED: August 1, 2005**

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The Division of Administration's Office of Data, Statistics and Vital Records must be notified of any projects intending to use vital records files prior to the project being started to assure availability and best use of vital records data. Depending on the nature of the project, the manager of the Office of Data, Statistics and Vital Records may assign staff to work on the project.

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Doneen B. Hollingsworth  
Secretary of Health

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Date